

**COPY**

Practitioner's Document No. 701039-052260

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Larry I. Benowitz  
Application No.: 09/656,915  
Filed: 07 September 2000  
For:

Group No.: 1614  
Examiner: To be assigned  
**METHODS AND COMPOSITIONS FOR MODULATING AXONAL  
OUTGROWTH OF CENTRAL NERVOUS SYSTEM NEURONS**

**CERTIFICATE OF MAILING (37 C.F.R. SECTION 1.8(a))**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Date

4/15/2002

(type or print name of person mailing)

Nicole M. Gignac  
(signature of person mailing paper)

Assistant Commissioner for Patents  
Washington, D.C. 20231

**POWER OF ATTORNEY BY ASSIGNEE OF ENTIRE INTEREST  
(REVOCATION OF PRIOR POWERS)**

As assignee of record of the entire interest of the above identified

☒ application,

☐ patent,

**REVOCATION OF PRIOR POWERS OF ATTORNEY**

all powers of attorney previously given are hereby revoked and

**NEW POWER OF ATTORNEY**

the following attorney(s) and/or agent(s) are hereby appointed to prosecute and transact all business in the Patent and Trademark Office connected therewith.

Michael L. Goldman, Attorney and Patent Agent, Registration No. 30,727  
Ronald I. Eisenstein, Attorney and Patent Agent, Registration No. 30,628  
David S. Resnick, Attorney and Patent Agent, Registration No. 34,235  
Lana A. Shvartsman, Attorney and Patent Agent, Registration No. 48,502  
Nicole L.M. Valtz, Patent Agent, Registration No. 47,150  
Leslie M. Levine, Attorney and Patent Agent, Registration No. 35,245

In re application of:  
Application No.:  
Filed:  
For:

Larry I. Benov

09/656,915

07 September 2000

METHODS AND COMPOSITIONS FOR MODULATING AXONAL  
OUTGROWTH OF CENTRAL NERVOUS SYSTEM

Group No.: 1614

Examiner: To be assigned



(check the following item, if applicable)

[X] Attached, as part of this power of attorney, is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

**SEND CORRESPONDENCE TO:**

David S. Resnick  
NIXON PEABODY LLP  
101 Federal Street  
Boston, MA 02110

**DIRECT TELEPHONE CALLS TO:**

David S. Resnick (617) 345-6057

Customer No.: 26248

The Children's Medical Center Corporation

(type or print identity of assignee of entire interest)

300 Longwood Avenue

Boston, MA 02115

Address

[X] Recorded in PTO on 01/04/2002

Reel 012437

Frame 0275

**ASSIGNEE STATEMENT**

Attached to this power is a "STATEMENT UNDER 37 C.F.R. section 3.73(b)."

Date

8 April 2002

Signature

Donald Lombardi

Donald Lombardi

(type or print name of person authorized to sign on behalf of assignee)

Chief Intellectual Property Officer

Intellectual Property Office

Children's Medical Center Corporation

Title

(check the following item, if it forms a part of this power of attorney)

[ ] Added page—Authorization of attorney(s) to accept and follow instructions from representative.

Practitioner's Docket No. 701039-05260



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Application No.: 09/656,915  
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Date

4/15/2002

Nicole M. Bignae  
(type or print name of person mailing paper)

Nicole M. Bignae  
(signature of person mailing paper)

Assistant Commissioner for Patents  
Washington, D.C. 20231

**STATEMENT UNDER 37 C.F.R. SECTION 3.73(b)  
ESTABLISHING RIGHT OF ASSIGNEE TO TAKE ACTION**

1. The assignee(s) of the entire right, title and interest hereby seek(s) to take action in the PTO in this matter.

**IDENTIFICATION OF ASSIGNEE**

2. The Children's Medical Center Corporation

Name of assignee

Corporation - Non-profit organization

Type of assignee, e.g., corporation, partnership, university, government agency, etc.

**PERSON AUTHORIZED TO SIGN**

3. Donald Lombardi

(type name of person authorized to sign on behalf of assignee)

Chief Intellectual Property Officer, Intellectual Property Office  
Children's Medical Center Corporation

Title of person authorized to sign

(complete the following, if applicable)

In re application of: Larry I. Benowitz; Carleen A. Irwin; Paul Jackson  
Application No.: 09/616,287 Group No.: 1647  
Filed: 14 July 2000 Examiner: Hayes, R.  
For: AXOGENESIS FACTOR 1 (AF-1), A TROPHIC FACTOR  
FOR CENTRAL NERVOUS SYSTEM REGENERATION



[X] I, the person signing below, state that I am empowered to sign this statement on behalf of the assignee.

### BASIS OF ASSIGNEE'S INTEREST

Ownership by the assignee is established as follows:

- A.
1. [X] An assignment from the inventors, Larry I. Benowitz of the matter identified above, which was recorded in the PTO on 01/04/2002 at Reel 012437, Frame 0275.
  2. [ ] An assignment (document) separately being submitted for recordal herewith.

### AND/OR

B. [ ] A chain of title from the inventor(s) to the current assignee as shown below:

1. From: \_\_\_\_\_  
Name of inventor(s)  
To: \_\_\_\_\_  
Recorded in PTO: Reel \_\_\_\_\_, Frame \_\_\_\_\_
2. From: \_\_\_\_\_  
Name of inventor(s) or assignee  
To: \_\_\_\_\_  
Recorded in PTO: Reel \_\_\_\_\_, Frame \_\_\_\_\_
3. From: \_\_\_\_\_  
Name of inventor(s) or assignee  
To: \_\_\_\_\_  
Recorded in PTO: Reel \_\_\_\_\_, Frame \_\_\_\_\_

(check item below, and add details, if applicable)

[ ] Additional documents in the chain of title are listed in the attached Supplemental Sheet.

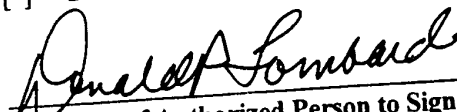
In re application of: Larry I. Benowitz; Carleen A. Irwin; Paul Jackson  
Application No.: 09/616,287 Group No.: 1647  
Filed: 14 July 2000 Examiner: Hayes, R.  
For: AXOGENESIS FACTOR I (AF-I), A TROPHIC FACTOR  
FOR CENTRAL NERVOUS SYSTEM REGENERATION

### COPIES OF DOCUMENTS IN CHAIN OF TITLE

*(complete this item, if copies are being sent)*

☐ Copies of the assignment(s) or other document(s) in the chain of title are attached as follows:

<input type="checkbox"/> A	<input type="checkbox"/> 1	<input type="checkbox"/> 2	
<input type="checkbox"/> B	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

  
Signature of Authorized Person to Sign

Donald Lombardi  
*(type or print name of person authorized to sign on behalf of assignee)*

Chief Intellectual Property Officer  
Intellectual Property Office  
Children's Medical Center Corporation  
Title